

**WEBB ZIESENHEIM LOGSDON ORKIN & HANSON, P.C.**

700 Koppers Building

436 Seventh Avenue

Pittsburgh, PA 15219-1818

Telephone: 412-471-8815 Facsimile: 412-471-4094

E-mail: webblaw@webblaw.com

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**FACSIMILE INFORMATION SHEET**Name of Individual: Examiner Archene A. Turner - GROUP ART 1775Company: U.S. Patent and Trademark OfficeCity and State: Alexandria, VA 22313-1450Facsimile Number: 703-872-9306From: Kent E. BaldaufTotal Number of Pages: 2 (including Information Sheet)Date Transmitted: December 2, 2004  
Appl. No. 09/831,327 - Attorney Docket No. 1217-010737  
Notice of Allowance dated 11/23/2004

Message:

See attached Notice of Allowability  
Allowed claims should read:  
1,4,6-16,18,19,21,22,24-37, 61-66 and 70-78. This is not clear.  
Drawings were filed on 07 May 2001, not 01 May 2004.  
Please issue a Supplemental Notice of Allowability.  
Kent E. Baldauf

If you do not receive all pages, please call back as soon as possible. The number is (412) 471-8815.

**STATEMENT OF CONFIDENTIALITY**

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**Notice of Allowability**

Application No.

09/831,327

Applicant(s)

KUSHIDA ET AL.

Examiner

Archene A Turner

Art Unit

1775

— The MAILING DATE of this communication appears on the cover sheet with the correspondence address—  
All claims being allowable, PROSECUTION ON THE MERITS IS (OR REMAINS) CLOSED in this application. If not included herewith (or previously mailed), a Notice of Allowance (PTOL-85) or other appropriate communication will be mailed in due course. THIS NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RIGHTS. This application is subject to withdrawal from issue at the initiative of the Office or upon petition by the applicant. See 37 CFR 1.313 and MPEP 1308.

1. ☒ This communication is responsive to 10-21-04. 61-66
2. ☒ The allowed claim(s) is/are 1,4,6-16,18,19,21,22,24-37 and 60-78.
3. ☒ The drawings filed on 01 May 2004 are accepted by the Examiner.
4. ☒ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).  
a) ☒ All b) ☐ Some\* c) ☐ None of the:  
1. ☐ Certified copies of the priority documents have been received.  
2. ☐ Certified copies of the priority documents have been received in Application No. \_\_\_\_\_.  
3. ☒ Copies of the certified copies of the priority documents have been received in this national stage application from the International Bureau (PCT Rule 17.2(a)).

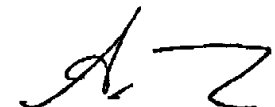
\* Certified copies not received: \_\_\_\_\_.

Applicant has THREE MONTHS FROM THE "MAILING DATE" of this communication to file a reply complying with the requirements noted below. Failure to timely comply will result in ABANDONMENT of this application.  
**THIS THREE-MONTH PERIOD IS NOT EXTENDABLE.**

5. ☐ A SUBSTITUTE OATH OR DECLARATION must be submitted. Note the attached EXAMINER'S AMENDMENT or NOTICE OF INFORMAL PATENT APPLICATION (PTO-152) which gives reason(s) why the oath or declaration is deficient.
6. ☐ CORRECTED DRAWINGS (as "replacement sheets") must be submitted.  
(a) ☐ Including changes required by the Notice of Draftsperson's Patent Drawing Review (PTO-948) attached  
1) ☐ hereto or 2) ☐ to Paper No./Mail Date \_\_\_\_\_.  
(b) ☐ including changes required by the attached Examiner's Amendment / Comment or in the Office action of Paper No./Mail Date \_\_\_\_\_.  
Identifying indicia such as the application number (see 37 CFR 1.84(c)) should be written on the drawings in the front (not the back) of each sheet. Replacement sheet(s) should be labeled as such in the header according to 37 CFR 1.121(d).
7. ☐ DEPOSIT OF and/or INFORMATION about the deposit of BIOLOGICAL MATERIAL must be submitted. Note the attached Examiner's comment regarding REQUIREMENT FOR THE DEPOSIT OF BIOLOGICAL MATERIAL.

**Attachment(s)**

- |   |   |
|---|---|
| 1. <input type="checkbox"/> Notice of References Cited (PTO-892)  | 5. <input type="checkbox"/> Notice of Informal Patent Application (PTO-152)           |
| 2. <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948)                                | 6. <input type="checkbox"/> Interview Summary (PTO-413),<br>Paper No./Mail Date _____ |
| 3. <input type="checkbox"/> Information Disclosure Statements (PTO-1449 or PTO/SB/08),<br>Paper No./Mail Date _____ | 7. <input type="checkbox"/> Examiner's Amendment/Comment                              |
| 4. <input type="checkbox"/> Examiner's Comment Regarding Requirement for Deposit<br>of Biological Material          | 8. <input type="checkbox"/> Examiner's Statement of Reasons for Allowance             |
|   | 9. <input type="checkbox"/> Other _____   |

  
ARCHENETURNER  
PATENT EXAMINER